CLARK COUNTY HEALTH CARE CENTER

W4266	STREET	HWY	29
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OWEN	54460	Phone: (715) 229-2172		Ownership:	County
Operated from 1/	1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjun	ction with H	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Se	t Up and Sta	affed (12/31/03):	172	Title 18 (Medicare) Certified?	Yes
Total Licensed Be	d Capacity	(12/31/03):	172	Title 19 (Medicaid) Certified?	Yes
Number of Residen	ts on 12/31,	/03:	165	Average Daily Census:	165

Services Provided to Non-Residents		Age, Gender, and Primary Di	-		(12/31/03)	Length of Stay (12/31/03)	용
Home Health Care	No	   Primary Diagnosis		Age Groups	용		20.0
Supp. Home Care-Personal Care	No					1 - 4 Years	39.4
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65	13.3	•	29.7
Day Services	No	Mental Illness (Org./Psy)	42.4	65 - 74	17.0		
Respite Care	No	Mental Illness (Other)	12.1	75 - 84	24.2		89.1
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	41.8	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.4	95 & Over	3.6	Full-Time Equivalent	
Congregate Meals	No	Cancer	7.9			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	7.3		100.0	(12/31/03)	
Other Meals	Yes	Cardiovascular	12.1	65 & Over	86.7		
Transportation	No	Cerebrovascular	6.1			RNs	9.1
Referral Service	No	Diabetes	4.2	Gender	용	LPNs	5.0
Other Services	No	Respiratory	5.5			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	0.0	Male	42.4	Aides, & Orderlies	45.4
Mentally Ill	Yes			Female	57.6	1	
Provide Day Programming for			100.0			I	
Developmentally Disabled	Yes			l	100.0		

## Method of Reimbursement

		edicare itle 18			edicaid			Other		:	Private Pay	:		amily Care			anaged Care	l 		
Level of Care	No.	90	Per Diem (\$)	No.	90	Per Diem (\$)	No.	્રે જ	Per Diem (\$)	No.	%	Per Diem (\$)	No.	્રે જ	Per Diem (\$)	No.	્ર	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	 5	45.5	292	7	5.6	136	0	0.0	0	1	3.4	133	0	0.0	0	0	0.0	0	13	7.9
Skilled Care	6	54.5	288	102	81.6	117	0	0.0	0	25	86.2	133	0	0.0	0	0	0.0	0	133	80.6
Intermediate				16	12.8	98	0	0.0	0	3	10.3	90	0	0.0	0	0	0.0	0	19	11.5
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende:	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	11	100.0		125	100.0		0	0.0		29	100.0		0	0.0		0	0.0		165	100.0

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/03
Deaths During Reporting Period		 			% Needing		Total
Percent Admissions from:		   Activities of	%		3	% Totally	Number of
Private Home/No Home Health	6.7	Daily Living (ADL)	Independent	One	or Two Staff	<del>-</del>	Residents
Private Home/With Home Health	7.4	Bathing	6.7		45.5	47.9	165
Other Nursing Homes	6.7	Dressing	23.0		38.8	38.2	165
Acute Care Hospitals	75.2	Transferring	38.2		35.2	26.7	165
Psych. HospMR/DD Facilities		Toilet Use	30.3		33.9	35.8	165
Rehabilitation Hospitals	1.3	Eating	38.2		40.0	21.8	165
Other Locations	2.0	**********	*****	*****	*****	*****	*****
Total Number of Admissions	149	Continence		용	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	al Catheter	3.6	Receiving Resp	iratory Care	5.5
Private Home/No Home Health	18.2	Occ/Freq. Incontinen	t of Bladder	60.6	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	19.5	Occ/Freq. Incontinen	t of Bowel	24.8	Receiving Suct	ioning	0.6
Other Nursing Homes	8.4	_			Receiving Osto	my Care	5.5
Acute Care Hospitals	11.7	Mobility			Receiving Tube	Feeding	7.9
Psych. HospMR/DD Facilities	0.6	Physically Restraine	d	9.7	Receiving Mech	anically Altered Diets	50.9
Rehabilitation Hospitals	0.0						
Other Locations	1.9	Skin Care			Other Resident C	haracteristics	
Deaths	39.6	With Pressure Sores		6.1	Have Advance D	irectives	73.9
Total Number of Discharges		With Rashes		5.5	Medications		
(Including Deaths)	154				Receiving Psyc	hoactive Drugs	70.3

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Gov	ernment	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	8			% Ratio		% Ratio		8	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.5	87.6	1.06	84.0	1.10	84.0	1.10	87.4	1.06
Current Residents from In-County	58.8	77.0	0.76	80.7	0.73	76.2	0.77	76.7	0.77
Admissions from In-County, Still Residing	29.5	25.0	1.18	21.5	1.37	22.2	1.33	19.6	1.50
Admissions/Average Daily Census	90.3	107.5	0.84	135.6	0.67	122.3	0.74	141.3	0.64
Discharges/Average Daily Census	93.3	108.9	0.86	137.2	0.68	124.3	0.75	142.5	0.66
Discharges To Private Residence/Average Daily Census	35.2	48.3	0.73	62.4	0.56	53.4	0.66	61.6	0.57
Residents Receiving Skilled Care	88.5	93.7	0.94	94.8	0.93	94.8	0.93	88.1	1.00
Residents Aged 65 and Older	86.7	88.4	0.98	94.5	0.92	93.5	0.93	87.8	0.99
Title 19 (Medicaid) Funded Residents	75.8	66.9	1.13	71.9	1.05	69.5	1.09	65.9	1.15
Private Pay Funded Residents	17.6	18.9	0.93	17.4	1.01	19.4	0.90	21.0	0.84
Developmentally Disabled Residents	0.0	0.5	0.00	0.6	0.00	0.6	0.00	6.5	0.00
			1.18						
Mentally Ill Residents	54.5	46.3		31.8	1.71	36.5	1.49	33.6	1.62
General Medical Service Residents	0.0	16.7	0.00	21.1	0.00	18.8	0.00	20.6	0.00
Impaired ADL (Mean)	53.5	47.8	1.12	47.6	1.12	46.9	1.14	49.4	1.08
Psychological Problems	70.3	63.4	1.11	57.6	1.22	58.4	1.20	57.4	1.23
Nursing Care Required (Mean)	10.2	7.3	1.40	7.8	1.32	7.2	1.43	7.3	1.40